1. ORGANIZATION					
Unique Application Number (UAN)					
Legal Name of Applicant					
Name of Agency Contact					
Agency Contact's Telephone Numbe	r				
FY 2012 FY 2013	Amount R	equested \$0.00 \$0.00	%of Perso	onnel and Fringe Requested 0% 0%	
		• • • • • • • • • • • • • • • • • • • •			
2. MISSION STATEMENT					
2.1 Provide the mission statement of your	our organiza	ation			
2 DESCRIPTION OF THE ORGANIZA	TION				
3. DESCRIPTION OF THE ORGANIZA 3.1 Give a description of the history of y		antion including the	ournage for w	high it was propted	
3.1 Give a description of the history of	your organi.	zation including the p	ourpose for wi	filch it was created.	
3.2 Give a description of how the organ	pization has	avolved to its current	at structura, th	nis may include the scope of service	co
geographic areas covered, staff heirard	nzanon nas hv. lenal or	ranization etc	it structure, tr	ils may include the scope of servi	ce,
goographic urous severeu, stair neitare	ny, logal of	gamzanori, oto.			
4. VICTIM SERVICES EXPERIENCE					YEARS
4.1 How many years has the organizati	ion been pro	oviding victim-related	services or a	assistance?	

5. VICTIM SERVICES WORK	
5.1 Provide a description of the work the organization is doing on behalf of victims of crime.	
5.2 How does this work fit into the organization's overall goals and objectives?	
6. VOLUNTEERS	
6.1 Does the organization currently have a volunteer program, or plan to implement one this grant term?	
of Dood the organization danomy have a volunteer program, or plan to implement one time gram term.	
6.2 How many volunteers were active within the last year?	
6.1 Does the organization currently have a volunteer program, or plan to implement one this grant term? 6.2 How many volunteers were active within the last year? 6.3 Describe how the organization utilizes or plans to utilize volunteers to support the organization's mission, including a	anv
6.3 Describe how the organization utilizes or plans to utilize volunteers to support the organization's mission, including a	any
	any
6.3 Describe how the organization utilizes or plans to utilize volunteers to support the organization's mission, including a	any
6.3 Describe how the organization utilizes or plans to utilize volunteers to support the organization's mission, including a	any
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6.3 Describe how the organization utilizes or plans to utilize volunteers to support the organization's mission, including a	any
6.3 Describe how the organization utilizes or plans to utilize volunteers to support the organization's mission, including a	any
6.3 Describe how the organization utilizes or plans to utilize volunteers to support the organization's mission, including a	any
6.3 Describe how the organization utilizes or plans to utilize volunteers to support the organization's mission, including a	any
6.3 Describe how the organization utilizes or plans to utilize volunteers to support the organization's mission, including a	any
6.3 Describe how the organization utilizes or plans to utilize volunteers to support the organization's mission, including a specific victim-related services.	
6.4 Describe training for volunteers including both training required prior to providing services and ongoing training cond	
6.3 Describe how the organization utilizes or plans to utilize volunteers to support the organization's mission, including a specific victim-related services.	
6.4 Describe training for volunteers including both training required prior to providing services and ongoing training cond	
6.4 Describe training for volunteers including both training required prior to providing services and ongoing training cond	
6.4 Describe training for volunteers including both training required prior to providing services and ongoing training cond	
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6.4 Describe training for volunteers including both training required prior to providing services and ongoing training cond	
6.4 Describe training for volunteers including both training required prior to providing services and ongoing training cond	

C.F. Describe how the experimation require and retains valuators or plane to do so	
6.5 Describe how the organization recruits and retains volunteers or plans to do so.	
7. COLLABORATIONS	
	nizationa (if
7.1 Describe the benefits realized by victims of crime as a result of your organization's collaboration(s) with other organization or collaboration (s) with other organization (s	nizations (if
your organization collaborates) or through your organization alone (if your organization does not collaborate).	
7.0 If your graphing the collection was idealist of the congrigations including the congrigation type (lowerfeed)	
7.2 If your organization collaborates, provide a list of the organizations, including the organization type (law enforceme	nt agency,
advocacy center, hospital, task force, etc.) the applicant collaborates with to serve victims of crime for the purpose of	supporting
or assisting in victim recovery.	
O CTATE AND FEDERAL FUNDS EXPEDIENCE	YEARS
8. STATE AND FEDERAL FUNDS EXPERIENCE	TEAKS
8.1 How many years of experience does the organization have in managing state or federal grant funds?	

OVAG/VCLG Application TAB B-Output Target Calculation

9. OUTPUT TARGET CALCULATION	STAFF POSI	TION/TITLE #1		STAFF POSIT	TION/TITLE #2		STAFF POSIT	TION/TITLE #3	
9.1 STAFF POSITION/TITLE									
9.2 ADMINISTRATIVE POSITION]			
9.3 CONTRACT POSITION									
9.4 OUTPUT TARGET	ОИТРИТ	TARGET	Ī	ОИТРИТ	TARGET	GET OUTPU		T TARGET	
DIRECT VICTIM SERVICES	FY 2012	FY 2013	Ī	FY 2012	FY 2013		FY 2012	FY 2013	
Number of Unique Victims Served									
Assistance with Crime Victims' Compensation			İ						
Assistance with Texas SAVNS/VINE			İ						
Information and Referral			İ						
Criminal Justice Accompaniment			İ						
Law Enforcement Accompaniment			1			•			
Medical Accompaniment	1		Ī						
Crisis Intervention	1		Ī						
Individual Counseling			İ						
Support Groups	1		Ť			1			
Therapeutic Groups	1		Ī						
Peer Support Services			İ						
Assistatnce with Restitution			1			•			
Assistance with Victim Impact Panels			İ						
Assistance with Victim Impact Statements			1			•			
Emergency Funds			1			•			
Follow-up with Victim			İ						
Legal Assistance			İ						
Lodging									
Other									
Transportation									
Victim Advocacy									
VICTIM SERVICES TRAINING	FY 2012	FY 2013	ĺ	FY 2012	FY 2013		FY 2012	FY 2013	
Total Number of all Training Sessions									
Law Enforcement Individuals Trained									
Prosecution/Judicial Individuals Trained									
School Faculty Individuals Trained									
Medical Individuals Trained									
Faith-Based Individuals Trained									
Volunteer Individuals Trained									
Other Individuals Trained									
Total Number of all Individuals Trained	0	0		0	0		0	0	
OUTREACH OR COMMUNITY EDUCATION	FY 2012	FY 2013		FY 2012	FY 2013		FY 2012	FY 2013	
Outreach or Community Education Presentations			1						
Outreach or Community Education Participants			1						
Informational Fairs			1						
Total Attendees at Informational Fairs]						
25% of Total Attendees (auto-calculates)	0		1	0			0	0	
Total Outreach or Community Ed Presentations	0	0	1	0	0		0	0	
STRUCTURED EDUCATION	FY 2012	FY 2013		FY 2012	FY 2013		FY 2012	FY 2013	
Structured Education Presentations			1						
Structured Education Participants									

OVAG/VCLG Application TAB B-Output Target Calculation

9. OUTPUT TARGET CALCULATION	STAFF POSI	TION/TITLE #4		STAFF POSIT	TION/TITLE #5		STAFF POSIT	TION/TITLE #6	
9.1 STAFF POSITION/TITLE									
9.2 ADMINISTRATIVE POSITION									
9.3 CONTRACT POSITION									
9.4 OUTPUT TARGET	ОИТРИТ	TARGET		OUTPUT	TARGET	T OUTP		UT TARGET	
DIRECT VICTIM SERVICES	FY 2012	FY 2013		FY 2012	FY 2013		FY 2012	FY 2013	
Number of Unique Victims Served	1		ŀ			ŀ			
Assistance with Crime Victims' Compensation	1		Ì			Ì			
Assistance with Texas SAVNS/VINE	1		Ì			Ì			
Information and Referral	1		Ì			Ì			
Criminal Justice Accompaniment	1		Ì			Ì			
Law Enforcement Accompaniment	1		İ			İ			
Medical Accompaniment	1		İ			İ			
Crisis Intervention	1		İ			İ			
Individual Counseling			İ			İ			
Support Groups	1		1			İ			
Therapeutic Groups	1		İ			İ			
Peer Support Services	1		Ì			Ì			
Assistatnce with Restitution	1		İ			İ			
Assistance with Victim Impact Panels	1		Ì			Ì			
Assistance with Victim Impact Statements	1		İ			İ			
Emergency Funds	1		İ			İ			
Follow-up with Victim	1		Ì			Ì			
Legal Assistance	1		Ì			Ì			
Lodging			Ī			Ī			
Other			Ī			Ī			
Transportation			Ī			Ī			
Victim Advocacy			Ī			Ī			
VICTIM SERVICES TRAINING	FY 2012	FY 2013		FY 2012	FY 2013		FY 2012	FY 2013	
Total Number of all Training Sessions			Ĩ			Ī			
Law Enforcement Individuals Trained			Ī			Ī			
Prosecution/Judicial Individuals Trained			Ī			Ī			
School Faculty Individuals Trained			Ī			Ī			
Medical Individuals Trained			Ī			Ī			
Faith-Based Individuals Trained			Ī			Ī			
Volunteer Individuals Trained			Ī			Ī			
Other Individuals Trained									
Total Number of all Individuals Trained	0	0		0	0		0	0	
OUTREACH OR COMMUNITY EDUCATION	FY 2012	FY 2013		FY 2012	FY 2013		FY 2012	FY 2013	
Outreach or Community Education Presentations			1			1			
Outreach or Community Education Participants			1			1			
Informational Fairs			1			1			
Total Attendees at Informational Fairs			1			1			
25% of Total Attendees (auto-calculates)	0		ļ.	0		1	0	0	
Total Outreach or Community Ed Presentations	0	0	1	0	0	1	0	0	
STRUCTURED EDUCATION	FY 2012	FY 2013		FY 2012	FY 2013		FY 2012	FY 2013	
Structured Education Presentations			1			1			
Structured Education Participants									

10	. PERSONNEL & FRINGE														
	FY 2012		HOU	RS PER V	VEEK					SALARY			FR	INGE	
	Title of Position	Sched- uled to work	Sched- uled on this grant.	Direct Services on this grant.	Admin. on this grant.	Other on this grant.		nnual Salary		Total Salary Requested on this grant.	% Salary Funded by this grant.	Annual Fringe Benefits for the Position	Fu Req	inge inds uested s grant.	% Fringe Funded by this grant.
1.			0				\$	-	- 5	\$ -	0.00%	\$ -	\$	-	0.00%
2.			0				\$	-		\$ -	0.00%		\$	-	0.00%
3.			0				\$	-	,	\$ -	0.00%	\$ -	\$	-	0.00%
4.			0				\$	-	,	\$ -	0.00%		\$	-	0.00%
5.			0				\$	-		\$ -	0.00%		\$	-	0.00%
6.			0				\$	-		\$ -	0.00%	\$ -	\$	-	0.00%
									;	<u> </u>			\$	-	
	FY 2013			RS PER V	VEEK	1				SALARY				INGE	
1.			0				\$	-		\$ -	0.00%	\$ -	\$	-	0.00%
2.			0				\$	-		\$ -	0.00%		\$	-	0.00%
3. 4.		-	0				\$	-		\$ <u>-</u> \$ -	0.00% 0.00%		\$	-	0.00%
4. 5.			0				\$			\$ - \$ -	0.00%		\$	-	0.00%
5. 6.			0				\$			\$ -	0.00%	\$ -	\$	-	0.00%
0.			U				Φ			\$ -	0.00%	Φ -	\$	-	0.00%
10	.1 FY 2012 POSITION NARRATIVE								_	-			Þ		
	ovide a justification, which relates to t	the project	's goal.												
2.															
5.															
6.															

10	U.2 FY 2013 POSITION NARRATIVE								
Pr	rovide a justification, which relates to t	ne project's goal.							
1.	•								
2.									
2									
3									
4.									
5.									
6.									
0.	•								
_									
10		OVAG REQUIREMENTS							
Ilno	0.3 REQUEST FOR EXCEPTION TO (e reason and justification for why the Applicant is	asking for the	exception					
	ndicate in the space provided below the	reacon and justineation for may the rippineant to		oncop ii oi ii					
	ndicate in the space provided below the	reacen and judanication is: my the represent is	J	олоорион					
	idicate in the space provided below the	reacon and justification for any the rippinount to		олоорион.					
	ndicate in the space provided below the	Teach and Jackinean III in the Applicant of	J	oxeopiie					
	ndicate in the space provided below the	Todaco una jacunaduri i i i i i i i i i i i i i i i i i i	J	олоориот					
	dicate in the space provided below the	To account of the second of th		олоорио					
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	ndicate in the space provided below the						FY 2013		
111	ndicate in the space provided below the			FY 2012			FY 2013		
111	1. PROFESSIONAL & CONSULTANT Name of Professional/Company that	SERVICES	No. of Days			No. of Days	FY 2013 Rate of		
111	ndicate in the space provided below the	SERVICES Description of Professional & Consultant		FY 2012	Cost	No. of Days		Cost	t
111 I	1. PROFESSIONAL & CONSULTANT Name of Professional/Company that	SERVICES	No. of Days	FY 2012 Rate of Compensat-	Cost		Rate of	Cost	t
111 P	1. PROFESSIONAL & CONSULTANT Name of Professional/Company that Applicant will contract with to perform	SERVICES Description of Professional & Consultant	No. of Days	FY 2012 Rate of Compensation		of	Rate of Compensat- ion		t
111 I	1. PROFESSIONAL & CONSULTANT Name of Professional/Company that Applicant will contract with to perform	SERVICES Description of Professional & Consultant	No. of Days	FY 2012 Rate of Compensation	\$ -	of	Rate of Compensation	\$	t
111 P	1. PROFESSIONAL & CONSULTANT Name of Professional/Company that Applicant will contract with to perform	SERVICES Description of Professional & Consultant	No. of Days	FY 2012 Rate of Compensation \$ - \$ -	\$ -	of	Rate of Compensation \$ - \$ -	\$	t -
111 P	1. PROFESSIONAL & CONSULTANT Name of Professional/Company that Applicant will contract with to perform	SERVICES Description of Professional & Consultant	No. of Days	FY 2012 Rate of Compensation	\$ -	of	Rate of Compensation	\$	t
111 P	1. PROFESSIONAL & CONSULTANT Name of Professional/Company that Applicant will contract with to perform	SERVICES Description of Professional & Consultant	No. of Days	FY 2012 Rate of Compensation \$ - \$ - \$ -	\$ - \$ -	of	Rate of Compensation \$ - \$ - \$	\$ \$ \$	t
111 P	1. PROFESSIONAL & CONSULTANT Name of Professional/Company that Applicant will contract with to perform	SERVICES Description of Professional & Consultant	No. of Days	FY 2012 Rate of Compensation \$ - \$ - \$ - \$ -	\$ - \$ - \$ -	of	Rate of Compensation \$ - \$ - \$ - \$ -	\$ \$ \$ \$	t
111 I	1. PROFESSIONAL & CONSULTANT Name of Professional/Company that Applicant will contract with to perform	SERVICES Description of Professional & Consultant	No. of Days	FY 2012 Rate of Compensation \$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ - \$	\$ - \$ - \$ - \$ -	of Consultation	Rate of Compensation \$ - \$ - \$ - \$ - \$ - \$ -	\$ \$ \$ \$	t
111 I	1. PROFESSIONAL & CONSULTANT Name of Professional/Company that Applicant will contract with to perform	SERVICES Description of Professional & Consultant	No. of Days	FY 2012 Rate of Compensation \$ - \$ - \$ - \$ -	\$ - \$ - \$ - \$ - \$ -	of Consultation	Rate of Compensation \$ - \$ - \$ - \$ -	\$ \$ \$ \$ \$	-
111 A	1. PROFESSIONAL & CONSULTANT Name of Professional/Company that Applicant will contract with to perform Professional & Consultant Services	SERVICES Description of Professional & Consultant Services	No. of Days	FY 2012 Rate of Compensation \$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ - \$	\$ - \$ - \$ - \$ -	of Consultation	Rate of Compensation \$ - \$ - \$ - \$ - \$ - \$ -	\$ \$ \$ \$	t
111 A	1. PROFESSIONAL & CONSULTANT Name of Professional/Company that Applicant will contract with to perform Professional & Consultant Services	SERVICES Description of Professional & Consultant Services SULTANT SERVICES NARRATIVE	No. of Days of Consultation	FY 2012 Rate of Compensation \$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ - \$	\$ - \$ - \$ - \$ - \$ -	of Consultation	Rate of Compensation \$ - \$ - \$ - \$ - \$ - \$ -	\$ \$ \$ \$ \$	-
111 A	1. PROFESSIONAL & CONSULTANT Name of Professional/Company that Applicant will contract with to perform Professional & Consultant Services	SERVICES Description of Professional & Consultant Services	No. of Days of Consultation	FY 2012 Rate of Compensation \$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ - \$	\$ - \$ - \$ - \$ - \$ -	of Consultation	Rate of Compensation \$ - \$ - \$ - \$ - \$ - \$ -	\$ \$ \$ \$ \$	-
111 A	1. PROFESSIONAL & CONSULTANT Name of Professional/Company that Applicant will contract with to perform Professional & Consultant Services	SERVICES Description of Professional & Consultant Services SULTANT SERVICES NARRATIVE	No. of Days of Consultation	FY 2012 Rate of Compensation \$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ - \$	\$ - \$ - \$ - \$ - \$ -	of Consultation	Rate of Compensation \$ - \$ - \$ - \$ - \$ - \$ -	\$ \$ \$ \$ \$	-
111 A	1. PROFESSIONAL & CONSULTANT Name of Professional/Company that Applicant will contract with to perform Professional & Consultant Services	SERVICES Description of Professional & Consultant Services SULTANT SERVICES NARRATIVE	No. of Days of Consultation	FY 2012 Rate of Compensation \$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ - \$	\$ - \$ - \$ - \$ - \$ -	of Consultation	Rate of Compensation \$ - \$ - \$ - \$ - \$ - \$ -	\$ \$ \$ \$ \$	-
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111 A	1. PROFESSIONAL & CONSULTANT Name of Professional/Company that Applicant will contract with to perform Professional & Consultant Services	SERVICES Description of Professional & Consultant Services SULTANT SERVICES NARRATIVE	No. of Days of Consultation	FY 2012 Rate of Compensation \$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ - \$	\$ - \$ - \$ - \$ - \$ -	of Consultation	Rate of Compensation \$ - \$ - \$ - \$ - \$ - \$ -	\$ \$ \$ \$ \$	-
111 Pr	1. PROFESSIONAL & CONSULTANT Name of Professional/Company that Applicant will contract with to perform Professional & Consultant Services 1.1 FY 2012 PROFESSIONAL & CON rovide a justification for Professional &	SERVICES Description of Professional & Consultant Services SULTANT SERVICES NARRATIVE Consultant Services which relates to the project	No. of Days of Consultation	FY 2012 Rate of Compensation \$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ - \$	\$ - \$ - \$ - \$ - \$ -	of Consultation	Rate of Compensation \$ - \$ - \$ - \$ - \$ - \$ -	\$ \$ \$ \$ \$	-
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111 A	1. PROFESSIONAL & CONSULTANT Name of Professional/Company that Applicant will contract with to perform Professional & Consultant Services 1.1 FY 2012 PROFESSIONAL & CON rovide a justification for Professional &	SERVICES Description of Professional & Consultant Services SULTANT SERVICES NARRATIVE Consultant Services which relates to the project	No. of Days of Consultation	FY 2012 Rate of Compensation \$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ - \$	\$ - \$ - \$ - \$ - \$ -	of Consultation	Rate of Compensation \$ - \$ - \$ - \$ - \$ - \$ -	\$ \$ \$ \$ \$	-

12. TRAVEL								
				FY 2012			FY 2013	
Travel Purpose	Positions: List all positions (separated by a comma) requested within travel type.	Expense Type	Total Cost of Travel	% Requested by this OAG Grant	Cost Requested by this OAG Grant	Total Cost of Travel	% Requested by this OAG Grant	Cost Requested by this OAG Grant
		Airfare/Mileage	\$ -		\$ -	\$ -		\$ -
		Hotel	\$ -		\$ -	\$ -		\$ -
OAG Sponsored Training		Per diem	\$ -		\$ -	\$ -		\$ -
		Misc./Hotel Tax	\$ -		\$ -	\$ -		\$ -
		TOTAL			\$ -			\$ -
					\$ -			\$ -
					\$ -			\$ -
					\$ -			\$ -
Travel Purpose	Positions: List all positions (separated by a comma) requested within travel type.	Expense Type	Number of Miles	Cost Per Mile Requested by this OAG Grant	Cost Requested by this OAG Grant	Number of Miles	Cost Per Mile Requested by this OAG Grant	Cost Requested by this OAG Grant
Local Travel (Mileage Only)	<u>-</u>	Mileage		\$ -	\$ -		\$ -	\$ -
					\$ -			\$ -

12.1 FY 2012 TRAVEL NARRATIVE

Provide a justification describing the travel staff members will perform. This should include the location to be traveled to, the number of trips planned, the title of the staff member who will be making the trips, and how the travel supports the goal of the grant.

12.2 FY 2013 TRAVEL NARRATIVE

Provide a justification describing the travel staff members will perform. This should include the location to be traveled to, the number of trips planned, the title of the staff member who will be making the trips, and how the travel supports the goal of the grant.

13. EQUIPMENT							
	FY 2012			FY 2013			
	Total Cost	%	Cost	Total Cost	%	Cost	
lia na		Requested	Requested		Requested	Requested	
ltem	of	by this OAG	by this OAG	of	by this OAG	by this OAG	
	Equipment	Grant	Grant	Equipment	Grant	Grant	
	\$ -	0%	\$ -	\$ -	0%	\$ -	
	\$ -	0%	\$ -	\$ -	0%	\$ -	
	\$ -	0%	\$ -	\$ -	0%	\$ -	
	\$ -	0%	\$ -	\$ -	0%	\$ -	
		•	\$ -			\$ -	

13.1 FY 2012 EQUIPMENT NARRATIVE

Provide a justification for Equipment which relates to the project's goal.

13.2 FY 2013 EQUIPMENT NARRATIVE

Provide a justification for Equipment which relates to the project's goal.

0%

0%

0%

0%

0%

0%

\$

\$ \$

\$ **\$**

14. SUPPLIES							
			FY 2012			FY 2013	
			%	Cost		%	Cost
ltem	Total Co	ost	Requested	Requested	Total Cost	Requested	Requested
iteiii	of Suppl	lies	by this OAG	by this OAG	of Supplies	by this OAG	by this OAG
			Grant	Grant		Grant	Grant
	\$	-	0%	\$ -	\$ -	0%	\$ -
	\$	-	0%	\$ -	\$ -	0%	\$ -
	\$	-	0%	\$ -	\$ -	0%	\$ -
	\$	-	0%	\$ -	\$ -	0%	\$ -
				\$ -			\$ -
14.1 FY 2012 SUPPLIES NARRATIVE							
Provide a justification for Supplies which relates to the project's goal.							
14.2 FY 2013 SUPPLIES NARRATIVE							
Provide a justification for Supplies which relates to the project's goal.							
AL ATHER RIPERT ARER ATIMO EVRENCES (ADAE)							
15. OTHER DIRECT OPERATING EXPENSES (ODOE)							
			FY 2012	-		FY 2013	
			%	Cost		%	Cost
ltem	Total Co		Requested	Requested	Total Cost	Requested	Requested
ItÇIII	of ODC	E	by this OAG	by this OAG	of ODOE	by this OAG	by this OAG
			Grant	Grant		Grant	Grant
OAG Sponsored Training Registration	\$	-	0%	\$ -	\$ -	0%	\$ -
	\$	-	0%	\$ -	\$ -	0%	\$ -
	\$	-	0%	\$ -	\$ -	0%	\$ -
	\$	-	0%	\$ -	\$ -	0%	\$ -

\$

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\$

0%

0%

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0%

\$

- \$

- \$

- \$

- \$

15.1 FY 2012 OTHER DIRECT OPERATING EXPENSES NARRATIVE

Provide a justification for Other Direct Operating Expenses which relates to the project's goal.

15.2 FY 2013 OTHER DIRECT OPERATING EXPENSES NARRATIVE
Provide a justification for Other Direct Operating Expenses which relates to the project's goal.

16. PROJECT SUMMARY			
	now he wood by the OAC to summer	ize or describe the project. "This project funds [number of	
staff] to serve victims by providing [types of] se		ize of describe the project. This project funds (number of	
17. TARGET POPULATION		ODEOUEIO DODINI ATIONIO	
SPECIFIC VICTIMIZATIONS		SPECIFIC POPULATIONS	
Adults Molested as Children		African-American	
Assault		Asian	
Child Abuse DUI/DWI		Elderly (65 and up) Gay/Lesbian/Bisexual/Transgender	
Family Violence		Hispanic	
Hate/Bias Crimes	+	Persons with Disabilities	
Human Trafficking		Rural	
Physical Abuse and/or Neglect		Spanish-speaking	
Robbery		Other	
Sexual Assault			
Survivors of Homicide Victims			
Other Victims of Crime			
18. PROBLEM STATEMENT			
		designed to address as it relates to the specific victimizati	on
18.1 Provide a brief description of the specific vitypes reported in 17. Target Population of Tab I		designed to address as it relates to the specific victimizati	on
		designed to address as it relates to the specific victimizati	on
		designed to address as it relates to the specific victimizati	on
		designed to address as it relates to the specific victimizati	on
		designed to address as it relates to the specific victimizati	on
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		designed to address as it relates to the specific victimizati	on
		designed to address as it relates to the specific victimizati	on
		designed to address as it relates to the specific victimizati	on
types reported in 17. Target Population of Tab I		designed to address as it relates to the specific victimizati	on
types reported in 17. Target Population of Tab I	D - Project Summary.		
types reported in 17. Target Population of Tab I 19. SUPPORTING DATA 19.1 Justify the need for the victim-related issue	D - Project Summary. e(s) and/or specific victimization type	es this project is designed to address by citing research ar	
types reported in 17. Target Population of Tab I	D - Project Summary. e(s) and/or specific victimization type		
types reported in 17. Target Population of Tab I 19. SUPPORTING DATA 19.1 Justify the need for the victim-related issue	D - Project Summary. e(s) and/or specific victimization type		
types reported in 17. Target Population of Tab I 19. SUPPORTING DATA 19.1 Justify the need for the victim-related issue	D - Project Summary. e(s) and/or specific victimization type		
types reported in 17. Target Population of Tab I 19. SUPPORTING DATA 19.1 Justify the need for the victim-related issue	D - Project Summary. e(s) and/or specific victimization type		
types reported in 17. Target Population of Tab I 19. SUPPORTING DATA 19.1 Justify the need for the victim-related issue	D - Project Summary. e(s) and/or specific victimization type		
types reported in 17. Target Population of Tab I 19. SUPPORTING DATA 19.1 Justify the need for the victim-related issue	D - Project Summary. e(s) and/or specific victimization type		
types reported in 17. Target Population of Tab I 19. SUPPORTING DATA 19.1 Justify the need for the victim-related issue	D - Project Summary. e(s) and/or specific victimization type		
types reported in 17. Target Population of Tab I 19. SUPPORTING DATA 19.1 Justify the need for the victim-related issue	D - Project Summary. e(s) and/or specific victimization type		
types reported in 17. Target Population of Tab I 19. SUPPORTING DATA 19.1 Justify the need for the victim-related issue	D - Project Summary. e(s) and/or specific victimization type		
types reported in 17. Target Population of Tab I 19. SUPPORTING DATA 19.1 Justify the need for the victim-related issue	D - Project Summary. e(s) and/or specific victimization type		
types reported in 17. Target Population of Tab I 19. SUPPORTING DATA 19.1 Justify the need for the victim-related issue	D - Project Summary. e(s) and/or specific victimization type		

20. PROJECT GOAL
20.1 Provide a project goal, which relates to your Problem Statement, that shows what the project plans to achieve over the next two years with
these grant funds. The goal should be a "SMART" goal: Specific, Measurable, Achieveable, Realistic and Timely.
21. OUTPUT ASSESSMENT AND EVALUATION
21.1 Describe the systems, including tools and/or processes, written policies and procedures, databases, tracking forms or quality control testing,
which will be used to track and verify the project's outputs.
which will be used to track and verify the project's outputs.

21.2 OUTPUTS SUMMARY	PROJECTE	PROJECTED TARGET			
DIRECT VICTIM SERVICES	FY 2012	FY 2013			
Number of Unique Victims Served	0	0			
Assistance with Crime Victims' Compensation	0	0			
Assistance with Texas VINE	0	0			
Information and Referral	0	0			
Criminal Justice Accompaniment	0	0			
Law Enforcement Accompaniment	0	0			
Medical Accompaniment	0	0			
Crisis Intervention	0	0			
Individual Counseling	0	0			
Support Groups	0	0			
Therapeutic Groups	0	0			
Peer Support Services	0	0			
Assistatnce with Restitution	0	0			
Assistance with Victim Impact Panels	0	0			
Assistance with Victim Impact Statements	0	0			
Emergency Funds	0	0			
Follow-up with Victim	0	0			
Legal Assistance	0	0			
Lodging	0	0			
Other	0	0			
Transportation	0	0			
Victim Advocacy	0	0			
VICTIM SERVICES TRAINING	FY 2012	FY 2013			
Total Number of all Training Sessions	0	0			
Law Enforcement Individuals Trained	0	0			
Prosecution/Judicial Individuals Trained	0	0			
School Faculty Individuals Trained	0	0			
Medical Individuals Trained	0	0			
Faith-Based Individuals Trained	0	0			
Volunteer Individuals Trained	0	0			
Other Individuals Trained	0	0			
Total Number of all Individuals Trained	0	0			
OUTREACH OR COMMUNITY EDUCATION	FY 2012	FY 2013			
Outreach or Community Education Presentations	0	0			
Outreach or Community Education Participants	0	0			
Informational Fairs	0	0			
Total Attendees at Informational Fairs	0	0			
25% of Total Attendees (auto-calculates)	0	0			
Total Outreach or Community Ed Presentations	0	0			
STRUCTURED EDUCATION	FY 2012	FY 2013			
Structured Education Presentations	0	0			
Structured Education Participants	0	0			

21.3 PUBLIC AWARENESS CAMPAIGN (Statewide Applicants Only)

^{21.3} Describe the types of public service campaign products and activities (Internet, press releases, press conferences, tv and radio, etc.) provided in English and in other languages.

22. OUTCOMES	
22.1 OUTCOME ASSESSMENT AND EVALUATION	
DIRECT SERVICE OUTCOMES	Outcome Target %
Increase in knowledge and understanding of crime victims' rights.	
Increase in knowledge of and access to community resources and services.	
PROFESSIONAL TRAINING OUTCOME	
Increase in knowledge and understanding of crime victims' rights.	
COMMUNITY EDUCATION OUTCOME	
Increase in knowledge of and access to community resources and services.	
PUBLIC AWARENESS CAMPAIGNS	
Increase the knowledge about the warning signs of specific crimes and victimizations.	
CHILDREN'S ADVOCACY CENTERS (CAC)	
Reduction in trauma, crisis, stress and/or anxiety of child victim and/or protective family members.	
Increase understanding/knowledge regarding criminal and civil justices system process in general and/or in regard to their specific case.	
tools and/or processes written policies and procedures, pre- and post- tests, staff observation or surveys, which will be used to r project's outcome.	neasure the
22 COMMUNITY DESCUIDES	Vaa/Na

23. COMMUNITY RESOURCES	Yes/No
23.1 Is collaboration with one or more outside organizations required to achieve specific project activities?	
23.2 Do these collaborations currently exist?	
23.3 Describe why these agreements are required.	

24. DETAILED IMPLEMENTATION PLAN 24.1 Describe this project's specific activities, which will be done over the next two years.				
24.1 Describe this project's specific activities, which will be done over the next two years.				
M.4. Castinuad				
24.1 Continued:				
24.1 Continued:				
24.2 Describe how these activities will help to reach the project's goal.				
24.2 Describe how these activities will help to reach the project's goal.				
24.2 Describe how these activities will help to reach the project's goal.				
24.2 Describe how these activities will help to reach the project's goal.				
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24.2 Describe how these activities will help to reach the project's goal.				
24.2 Describe how these activities will help to reach the project's goal.				

25. SUSTAINABILITY PLAN
25.1 Briefly describe what would happen to the proposed grant project in the event that the OAG grant funds are no longer available.
26. FINANCIAL
26.1 FINANCIAL SYSTEMS
26.2 Describe the financial systems, internal controls, written policies and procedures, accounting software, databases, tracking forms or quality
control testing, which will be used to track and verify the project's financial activities.
26.3 BUDGET NARRATIVE
26.4 Provide a justification, which relate to the project's goal, for each requested budget category summarized in 27. Budget on Tab D - Project Summary.
outimely.

27. BUDGET					
PERSONNEL	O/ of Dooldon	Line Mare in	FY 2012	FY 2013	Total Project
Description	% of Positions	Hrs./Week	Requested	Requested	Cost
	0%		\$	\$	\$
	0%		\$	\$	\$
	0%		\$	\$	\$
	0%		\$	\$	\$
	0%		\$	\$	\$
T / 1 FTF	0%		\$	\$	\$
Total FTEs	0.00	Personnel Total	\$	\$	•
FRINGE		Personnei Totai	<u> </u>	<u> </u>	\$
I KINGE			\$	\$	\$
			\$	\$	\$
			\$	\$	\$
			\$	\$	\$
			\$	\$	\$
			\$	\$	\$
		Fringe Total	\$	\$	\$
PROFESSIONAL & CONSULTANT			.1	.,	
			\$	\$	\$
			\$	\$	\$
			\$	\$	\$ \$
			\$ \$	\$ \$	\$ \$
			\$	\$	\$
	Professional & C	Consultant Total	\$	\$	<u>Ψ</u>
TRAVEL	T TOTOSSIONAL & C	onsultant rotal	Ψ1	Ψ	
OAG Sponsored Training			\$	\$	\$
			\$	\$	\$
			\$	\$	\$
			\$	\$	\$
Local Travel (Mileage Only)			\$	\$	\$
		Travel Total	\$	\$	\$
EQUIPMENT			•	•	
			\$	\$	\$
			\$ \$	\$ \$	\$ \$
			\$	\$	<u> </u>
	F	quipment Total	\$	\$	<u>Ψ</u>
SUPPLIES	_	-qaipinoni rotai	Ψ	Ψ	Ψ
			\$	\$	\$
			\$	\$	\$
			\$	\$	\$ \$
			\$	\$	\$
		Supplies Total	\$	\$	\$
OTHER DIRECT OPERATING EXPENSES				. 1	
OAG Sponsored Training Registration			\$	\$	\$
			\$	\$	\$ \$ \$ \$
			\$	\$	\$
			\$ \$	\$ \$	\$
			\$	\$	\$
			\$	\$	D
			\$	\$	\$ \$ \$ \$
			\$	\$	9
			\$	\$	9
Othor	Direct Operating	Expenses Total	\$	\$	\$
Offici					